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FACSIMILE TRANSMITTAL

DATE: 10/17/2005	FROM: Samuel A. Kassatly
TO: Examiner Scott L. Jarrett	TELEPHONE NO.: (408) 323-5111
U.S. Patent and Trademark Office	FACSIMILE NO.: (408) 521-0111
Group Art Unit: 3623	ATTY DOCKET NO.: ARC920010013US1
FACSIMILE NO.: 571-273-8300	SUBJECT: Amendment A

Title: "Automated Location-Based Disruption Recovery And Surrogate Selection Service"

Applicant(s): James H. Kaufman, et al.

Attorney Docket No.: ARC920010013US1

Serial No.: 09/903,360

Filing Date: July 10, 2001

TOTAL NUMBER OF PAGES INCLUDING THIS COVER PAGE 17THANK YOU FOR FORWARDING THIS DOCUMENT TO EXAMINER Scott L. Jarrett
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Respectfully submitted,

Samuel A. Kassatly
Reg. No. 32,247
Date: 10/17/2005Enclosure: Amendment ACERTIFICATE OF FAXINGI hereby certify that this correspondence is being faxed to the U.S. Patent and Trademark Office,
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PTO/SB/21 (09-04)


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/903,360	
	Filing Date	July 10, 2001	
	First Named Inventor	James H. Kaufman, et al.	
	Art Unit	3623	
	Examiner Name	Scott L. Jarrett	
Total Number of Pages in This Submission	17	Attorney Docket Number	ARC920010013US1

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Typed or printed name	Samuel A. Kassatly	Date	10/17/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 0**Complete if Known**

Application Number	09/903,360
Filing Date	July 10, 2001
First Named Inventor	James H. Kaufman, et al.
Examiner Name	Scott L. Jarrett
Art Unit	3623
Attorney Docket No.	ARC920010013US1

METHOD OF PAYMENT (check all that apply)

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
21	0	50
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
3	0	200
HP = highest number of independent claims paid for, if greater than 3.		
Total Claims	Extra Claims	Fee (\$)
21	0	50
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
3	0	200
HP = highest number of independent claims paid for, if greater than 3.		
Total Claims	Extra Claims	Fee (\$)
21	0	50
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
3	0	200
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE


If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
21	0	0	0	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

SUBMITTED BY		Registration No. 32247		Telephone 408-323-5111
Signature		(Attorney/Agent)		
Name (Print/Type)	Samuel A. Kassatly	Date		10/17/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Title: "Automated Location-Based Disruption Recovery And Surrogate Selection Service"

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Filed: July 10, 2001

Art Unit: 3623

Mail Stop: Amendment
Commissioner for Patents
P.O.Box 1450
Alexandria, VA 22313-1450

AMENDMENT A

Sir:

Applicants submit this Amendment is submitted in response to the Office action of **July 20, 2005**, and respectfully request that it be entered.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.

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